

RECEIVED
CENTRAL FAX CENTER

005/028

AUG 19 2010

PTO/SB/17 (10-07)

Approved for use through 09/30/2010 GPO:2005-0922

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known	
FEE TRANSMITTAL For FY 2009		Application Number	10/588,419
		Filing Date	February 8, 2005 (Int'l)
		First Named Inventor	Alain H. CURAUDEAU
		Examiner Name	D. A. Jagoe
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		Art Unit	1614
TOTAL AMOUNT OF PAYMENT		(\$)	1,110.00
		Attorney Docket No.	
		249892001700	

METHOD OF PAYMENT (check all that apply)

<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify):
<input checked="" type="checkbox"/> Deposit Account		Deposit Account Number		03-1952
				Deposit Account Name
				Morrison & Foerster LLP
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)				
<input type="checkbox"/> Charge fee(s) indicated below		<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee		
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17		<input checked="" type="checkbox"/> Credit any overpayments		

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)
Utility	330	165	540	270	220	110	—
Design	220	110	100	50	140	70	—
Plant	220	110	330	165	170	85	—
Reissue	330	165	540	270	650	325	—
Provisional	220	110	0	0	0	0	—

2. EXCESS CLAIM FEESFee Description

	Small Entity	Fee (\$)
Each claim over 20 (including Reissues)	x2	26
Each independent claim over 3 (including Reissues)	220	110
Multiple dependent claims	300	195

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
20 or HP	x	—	—	HP = highest number of total claims paid for, if greater than 20	—	—

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
3 or HP	x	—	—

HP = highest number of independent claims paid for, if greater than 3

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fees Paid (\$)
100	780	(round up to a whole number) x	—	—

4. OTHER FEE(S)	Fees Paid (\$)
Non-English Specification. \$130 fee (no small entity discount)	—
Other (e.g., late filing surcharge): 1253 Extension for response within third month	1,110.00

SUBMITTED BY			
Signature	<i>Jessica A. Conner</i>	Registration No. (Attorney/Agent)	54,403
Name (Print/Type)	Leslie A. Robinson	Telephone	(858) 314-7692
		Date	August 19, 2010

I hereby certify that this paper is being transmitted by facsimile to the Patent and Trademark Office, facsimile no. (571) 273-8300, on the date shown below.

Dated: August 19, 2010

Signature:  (Jessica A. Conner)

sd-528849